,								
MAR 0 1 2004)		U.S. Paten				PTO/SB/21 (02-04) gh 07/31/2006. OMB 0651-0031 EPARTMENT OF COMMERCE	
MAR Under the Pa	nerwork Reduction Act of 1995	no persons	s are required to respond to a collection Application Number		rmation unles			
TRADELINA TI	RANSMITTAL		Filing Date	Fehru	February 14, 2001			
FORM			First Named Inventor Michael Deway					
(to be used for all correspondence after initial filin			Art I Init		2635			
(10 be used 10/	all correspondence alter illidar	Examiner Name		Timothy Edwards Jr.				
			Attornov Dooket Number	Timothy Edwards Ji		r. 		
Total Number of	Pages in This Submission	26	Attorney Docket Number	1391-2	2400 (2000-IF	P-2105)		
ENCLOSURES (Check all that apply)								
Amendm A A Extension Express Informatio Documer Response Incomple	fter Final ffidavits/declaration(s) n of Time Request Abandonment Request on Disclosure Statement Copy of Priority	Reman	Drawing(s) Licensing-related Papers Petition Petition to Convert to a Provisional Application Power of Attorney, Revocation Change of Correspondence Addre Terminal Disclaimer Request for Refund CD, Number of CD(s) Lices resubmitted at the request of		do d	Technolopeal Cor Appeals Cor Appeal Not Deprietary Structure Enclor Intify belor Tences acknowl	osure(s) (please	
	SIGNA	TURE C	F APPLICANT, ATTORNI	EY, O	R AGEN	ſ		
Firm or Individual name	Shannon W. Bates Conley Rose, P.C.							
Signature	Shamer	War	ren Bates					
Date February 26, 2004								
	C	ERTIFIC	CATE OF TRANSMISSION	/MAII	LING			
I hereby certify th sufficient postage the date shown b	at this correspondence is to as first class mail in an en	eing facsi	mile transmitted to the USPTO or dressed to: Commissioner for Pat	deposi	ted with the	United S 0, Alexa	States Postal Service with Indria, VA 22313-1450 on	
Typed or printed	name Clare Jackson							
Signature	(I ahe	$\overline{\Omega}$	Jackson			Date	February 26, 2004	

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 350.S.C. 122 and 37 CFR 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

<u></u>						
TPE	Complete if Known					
Fige TRANSMITTAL	Application Number 09/783,158					
IAR 0 1 2004 (For FY 2004	Filing Date February 14, 2001					
Effective 1959/2003. Patent fees are subject to annual revision	First Named Inventor Michael Dewayne Finke et al					
TRANFIA TRANFIA	Examiner Name Timothy Edwards Jr.					
Applicant claims small entity status. See 37 CFR 1.27	Art Unit 2635					
TOTAL AMOUNT OF PAYMENT \$ 258.00	Attorney Docket No. 1391-22400 (2000-IP-002105)					
METHOD OF PAYMENT (Check all that apply)	FEE CALCULATION (continued)					
☐ Check ☐ Credit Card ☐ Money ☐ Other ☐ None ☐ Order ☐ Deposit Account:	3. ADDITIONAL FEES Large Entity					
Deposit Account Number: 03-2769 Deposit Account Name: Conley Rose, P.C. The Director is authorized to: (check all that apply)	1051 130 2051 65 Surcharge - late filing fee or oath 1052 50 2052 25 Surcharge - late provisional filing fee or cover sheet \$ 1053 130 1053 130 Non-English specification \$					
 ☑ Charge fee(s) indicated below ☑ Charge any additional fee(s) during the pendency of this application ☐ Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account 	1812 2,520 1812 2,520 For filing a request for <i>ex parte</i> reexamination \$ 18042 920* 1804 920* Requesting publication of SIR prior to Examiner action \$					
 ☑ Credit any overpayments FEE CALCULATION 1. BASIC FILING FEE 	1805 1,840* 1805 1,840* Requesting publication of SIR after Examiner action \$ 1251 110 2251 55 Extension for reply within first month \$ 1252 420 2252 210 Extension for reply within second month \$					
Large Entity Small Entity Fee Fee Fee Fee Description	1253 950 2253 475 Extension for reply within third month \$ 1254 1,480 2254 740 Extension for reply within fourth month \$ 1255 2,010 2255 1,005 Extension for reply within fifth month \$ 1401 330 2401 165 Notice of Appeal \$ 1402 330 2402 165 Filing a brief in support of an appeal \$ 1403 280 2403 140 Request for oral hearing \$					
1003 530 2003 265 Plant filing fee \$ 1004 770 2004 385 Reissue filing fee \$ 1005 160 2005 80 Provisional filing fee \$ SUBTOTAL (1) \$	1451 1,510 1452 1,510 Petition to institute a public use proceeding 1452 110 2452 55 Petition to revive - unavoidable 1453 1,330 2453 665 Petition to revive - unintentional 1501 1,330 2501 665 Utility issue fee (or reissue)					
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE Fee from Extra Claims below Fee Paid Fotal Claims = x 18.00 = \$	1502 480 2502 240 Design issue fee \$ \$ \$ \$ \$ \$ \$ \$ \$					
ndependent 20 – 17** = 3 x 86.00 = \$258.00 Claims Multiple Dependent 290.00 = \$	1806 180 1806 180 Submission of Information Disclosure Stmt \$ 8021 40 8021 40 Recording each patent assignment per property (times number of properties) \$ 1809 770 2809 385 Filing a submission after final rejection					
Large Entity Small Entity Fee Fee Fee Fee Description Code (\$) Code (\$) 1202 18 2202 9 Claims in excess of 20	(37 CFR § 1.129(a)) \$ 1810 770 2810 385 For each additional invention to be examined (37 CFR § 1.129(b)) \$ 1801 770 2801 385 Request for Continued Examination (RCE) \$					
1201 86 2201 43 Independent Claims in excess of 3 1203 290 2203 145 Multiple dependent claim, if not paid 1204 86 2204 43 *Reissue independent claims over original patent 1205 18 2205 0 **Peirsue claim in excess of 20 1206 1207	1802 900 1802 900 Request for expedited examination of a design application \$ Other fee (specify) Terminal Disclaimer \$					
1205 18 2205 9 ** Reissue claims in excess of 20 and over original patent SUBTOTAL (2) \$ 258.00 ** or number previously paid, if greater; For Reissues, see above	*Reduced by Basic Filing Fee Paid SUBTOTAL (3) \$					
SUBMITTED BY	Complete (if applicable)					
Name (Print/Type) Shannon W. Bates	Registration No. (Altomey/Agent) 47,412 Telephone (972) 731-2288					
Signature Shamas Waw						

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

RECEIVED

MAR 0 4 2004

Technology Center 2600